2012 Part D Standard Plan Cost-Sharing*

Part D Benefit Cost Periods	Costs and Who Pays	Beneficiary Pays (TrOOP)	Plan Pays	Total Amount Spent on Plan-Covered Drugs
Initial Deductible	Beneficiary pays 100% for covered drugs.	Up to \$320	\$0	\$320 (Amount spent on deductible before Initial Coverage Period begins)
Initial Coverage Period	Costs of covered drugs are shared: 25% by beneficiary, 75% by plan.	Up to \$652.50	\$1,957.50	\$2,610 (Amount spent during Initial Coverage Period before Coverage Gap begins)
Coverage Gap ("Donut Hole")	Discounts in 2012: Costs of plan-covered drugs are shared: Beneficiary pays 86% percent for plan-covered generic drugs, 50% for plan-covered brand name drugs (plus a nominal pharmacy dispensing fee).	 Important Note about TrOOP: The total amount spent in the gap on plancovered drug costs (up to \$3,727.50) includes: the drug costs paid by the beneficiary (slightly more than \$1,863.75, depending on how many brand-name drugs they take and what the pharmacy's dispensing fee is), and the 50% discount on brand name drugs paid by the drug manufacturer. (Plan pays nothing in the Coverage Gap.) While there is a 14% discount on covered-generic drugs in the coverage gap, the discount amount does not count toward TrOOP. 		Coverage Gap begins once reach the Initial Coverage Limit (\$2,930) \$3,727.50 (Total amount spent during the Coverage Gap before Catastrophic Benefit Period begins) \$6,657.50 (Total amount spent during Initial Coverage Period and Coverage Gap before Catastrophic Benefit Period begins)
Catastrophic Benefit Period	Costs of covered drugs are shared: Beneficiary pays reduced copay/coinsurance; plan pays the difference.	Greater of: 5 percent coinsurance <i>OR</i> \$2.60 copay for generic, \$6.50 copay for brand or non-preferred	Any remaining portion of the negotiated drug price.	Beneficiary will remain in the Catastrophic Benefit Period through December 31, 2012. Part D benefit will reset on January 1, 2013, starting again with a deductible.

^{*}Most Part D plans are <u>not</u> standard plans. This means calculating TrOOP (True Out-of-Pocket) costs during the deductible and Initial Coverage Limit periods for beneficiaries varies by plan.